

UNITED STATES DISTRICT COURT
for the
Northern District of Texas

WAYNE H. NORMAN

Plaintiff
v.
ENHANCED RECOVERY

Defendant

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)
)
)
Civil Action No. 4:12-CV-501-A

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address) ENHANCED RECOVERY
8014 BAYBERRY ROAD
JACKSONVILLE, FL. 32256

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are: WAYNE H. NORMAN

1001 BROOK HOLLOW DR.
EULESS, TEXAS 76039

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: 8/15/12

CLERK OF COURT


Signature of Clerk or Deputy Clerk



Civil Action No. 4:12-CV-501-A

PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))***This summons for *(name of individual and title, if any)* _____was received by me on *(date)* _____ I personally served the summons on the individual at *(place)* _____on *(date)* _____ ; or I left the summons at the individual's residence or usual place of abode with *(name)* _____

, a person of suitable age and discretion who resides there,

on *(date)* _____ , and mailed a copy to the individual's last known address; or I served the summons on *(name of individual)* _____ , who isdesignated by law to accept service of process on behalf of *(name of organization)* _____on *(date)* _____ ; or I returned the summons unexecuted because _____ ; or Other *(specify)*: _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00 .

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc:

PLAINTIFF Wayne H. Norman	COURT CASE NUMBER 4:12-CV-501-A
DEFENDANT Enhanced Recovery	TYPE OF PROCESS Summons in Civil Action

SERVE { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
AT ENHANCED RECOVERY
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
8014 BAYBERRY ROAD JACKSONVILLE, FL. 32256

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285	1
WAYNE H. NORMAN 1001 BROOK HOLLOW DR. EULESS, TEXAS 76039	Number of parties to be served in this case	1
	Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

FoldFold

Signature of Attorney other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
	<input type="checkbox"/> DEFENDANT	682-241-8688	8/13/12

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. <i>(Sign only for USM 285 if more than one USM 285 is submitted)</i>	Total Process	District of Origin No. _____	District to Serve No. _____	Signature of Authorized USMS Deputy or Clerk	Date
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (*See remarks below*)

Name and title of individual served (<i>if not shown above</i>)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode	
Address (<i>complete only different than shown above</i>)	Date	Time <input type="checkbox"/> am <input type="checkbox"/> pm
Signature of U.S. Marshal or Deputy		

Service Fee	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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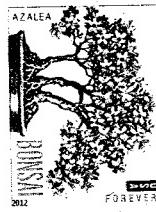
REMARKS:

PRINT 5 COPIES: 1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*- To be returned to the U.S. Marshal with payment

PRIOR EDITIONS MAY BE USED

Wayne H. Neenan
1001 Book Holman Dr.
Dallas TX 75239

2012 USPS 15¢ MFG: 48
COMMERCIAL COURT



United States District Court

F. T. Mohr Division

501 West 10th St. Rm 310
Fort Worth, TX. 76102-3673